This portion MUST ' rened with your payment to ensure propagate. THANK YOU ACCOUNT BILLED PROJECT NAME HARRIS, REX PROJECT ID STATE ML 43395 - FOSSILS DUE DATE ANNUAL FEE AMOUNT DUE FEE NOT ENCLOSED Change of Address

DUE DATE | ANNUAL FEE | AMOUNT DUE | 150 | \$ 150 | | 150 | | 150 | | 150 | | 150 | | 150 | | 150 | | 150 | | 150 | | 150 | | 150 | | 150 | | 150 | | 150 | | 150 | | 150 | | 150 | | 150 | | 150 | | 150 | | 150 | | 150 | | 150 | | 150 | | 150 | | 150 | | 150 | | 150 | | 150 | | 150 | | 150 | | 150 | | 150 | | 150 | | 150 | | 150 | | 150 | | 150 | | 150 | | 150 | | 150 | | 150 | | 150 | | 150 | | 150 | | 150 | | 150 | | 150 | | 150 | | 150 | | 150 | | 150 | | 150 | | 150 | | 150 | | 150 | | 150 | | 150 | | 150 | | 150 | | 150 | | 150 | | 150 | | 150 | | 150 | | 150 | | 150 | | 150 | | 150 | | 150 | | 150 | | 150 | | 150 | | 150 | | 150 | | 150 | | 150 | | 150 | | 150 | | 150 | | 150 | | 150 | | 150 | | 150 | | 150 | | 150 | | 150 | | 150 | | 150 | | 150 | | 150 | | 150 | | 150 | | 150 | | 150 | | 150 | | 150 | | 150 | | 150 | | 150 | | 150 | | 150 | | 150 | | 150 | | 150 | | 150 | | 150 | | 150 | | 150 | | 150 | | 150 | | 150 | | 150 | | 150 | | 150 | | 150 | | 150 | | 150 | | 150 | | 150 | | 150 | | 150 | | 150 | | 150 | | 150 | | 150 | | 150 | | 150 | | 150 | | 150 | | 150 | | 150 | | 150 | | 150 | | 150 | | 150 | | 150 | | 150 | | 150 | | 150 | | 150 | | 150 | | 150 | | 150 | | 150 | | 150 | | 150 | | 150 | | 150 | | 150 | | 150 | | 150 | | 150 | | 150 | | 150 | | 150 | | 150 | | 150 | | 150 | | 150 | | 150 | | 150 | | 150 | | 150 | | 150 | | 150 | | 150 | | 150 | | 150 | | 150 | | 150 | | 150 | | 150 | | 150 | | 150 | | 150 | | 150 | | 150 | | 150 | | 150 | | 150 | | 150 | | 150 | | 150 | | 150 | | 150 | | 150 | | 150 | | 150 | | 150 | | 150 | | 150 | | 150 | | 150 | | 150 | | 150 | | 150 | | 150 | | 150 | | 150 | | 150 | | 150 | | 150 | | 150 | | 150 | | 150 | | 150 | | 150 | | 150 | | 150 | | 150 | | 150 | | 150 | | 150 | | 150 | | 150 | | 150 | | 150 | | 150 | | 150 | | 150 | | 150 | | 150 | | 150 | | 150 | | 150 | | 150 | | 150 | | 150 | | 150 | | 150 | | 150 | | 150 | | 150 | | 150 | | 150 | | 150 | | 150 | | 150 | | 150 | | 150 | | 150 | | 150 | | 150 | | 150 | | 150 | | 150 | | 150 | | 150 | | 150 | | 1

Permittee requests an inspection to close out this permit.

Contact RECEIVED Address JUL 1 4 2005 E-Mail Address DIV OF OIL, GAS & MINING State Zip Phone

DIVISION OF OIL GAS AND MINING 1594 WEST NORTH TEMPLE SUITE 1210 PO BOX 145801 SALT LAKE CITY UT 84114-5801

Please make check payable to:

Division of Oil, Gas and Mining